

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☒ 24-Hour Notice ☐ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

- (b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

3563.02

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Patrick Collins

08/30/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
FairPoint Communications

Date

M M / D D / Y Y Y Y
0 8 / 2 6 / 2 0 1 0Mailing Address
PO Box 11021

Amount

137.57

City
LewistonState
MEZip Code
04243Purpose of Expenditure
UtilitiesCategory/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

33112.83

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Microsoft

Date

M M / D D / Y Y Y Y
0 8 / 2 9 / 2 0 1 0Mailing Address
One Microsoft Way

Amount

317.95

City
RedmondState
WAZip Code
98052Purpose of Expenditure
Computer SoftwareCategory/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

33430.78

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Daniel Kilgour

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
6 Windham Rd

Amount

200.00

City
HudsonState
NHZip Code
03051-3547Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

655.52

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 5**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Peter Lin-Marcus

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
77 Tyler St #5

Amount

150.00

City
BostonState
MAZip Code
02111-1834Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Sean Mohlmann

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
14 Blueberry Lane

Amount

150.00

City
NashuaState
NHZip Code
03062-1612Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
John Burton

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
4 Aetna Ct Apt 7

Amount

1750.00

City
NashuaState
NHZip Code
03064-2869Purpose of Expenditure
SalaryCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____(a) **SUBTOTAL** of Itemized Independent Expenditures

2050.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE **4 / 5**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Rachel Duffy

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
4-D Balcom St

Amount

105.00

City
NashuaState
NHZip Code
03060-3761Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Daniel Hagen

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
41 Fred St

Amount

152.50

City
LowellState
MAZip Code
01850-1105Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Brian Clark

Date

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0Mailing Address
414 Princeton Blvd

Amount

100.00

City
LowellState
MAZip Code
01851-2333Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ HouseState: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

36538.28

Disbursement For:
2010☒ Primary☐ General☐ Other (specify) _____(a) **SUBTOTAL** of Itemized Independent Expenditures

357.50

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 / 5

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee

Tracy Larkin

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address

102A Townsend St

Amount

150.00

City

Pepperell

State

MA

Zip Code

01463-1283

Purpose of Expenditure

Canvasser

Category/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Disbursement For:

☒ Primary☐ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

36538.28

Full Name (Last, First, Middle Initial) of Payee

Christopher Bourcier

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address

7 Daniel Rd

Amount

150.00

City

Derry

State

NH

Zip Code

03038-5275

Purpose of Expenditure

Canvasser

Category/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Disbursement For:

☒ Primary☐ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

36538.28

Full Name (Last, First, Middle Initial) of Payee

Javier Suarez

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address

110 Walnut Street

Amount

200.00

City

Nashua

State

NH

Zip Code

03060-6441

Purpose of Expenditure

Canvasser

Category/
Type

Office Sought:

☐ House

State: NH

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Disbursement For:

☒ Primary☐ General☐ Other (specify) _____Calendar Year-To-Date Per Election
for Office Sought

36538.28

(a) SUBTOTAL of Itemized Independent Expenditures

500.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

3563.02